MyelomaUK

Dexamethasone

AL amyloidosis Treatment Guide

What is dexamethasone?

Dexamethasone is a steroid medicine used in the treatment of AL amyloidosis. It belongs to a class of steroids called glucocorticoids.

How does it work?

Treatment for AL amyloidosis aims to kill the abnormal plasma cells. This prevents more amyloid being produced and enables the body to clear existing deposits gradually.

Dexamethasone mimics the action of a naturally occurring hormone produced in the body. It has two main uses in AL amyloidosis:

- Killing abnormal plasma cells
- Making other AL amyloidosis medicines work better

How is dexamethasone given?

Dexamethasone can be given by mouth (orally) or into a vein (intravenously). In AL amyloidosis it is most often used in tablet form.

Dexamethasone is usually given in combination with other AL amyloidosis treatments

Aim to take dexamethasone early in the morning when possible. It can cause trouble sleeping if taken later in the day.

Dexamethasone tablets should be swallowed whole with food or milk to protect the lining of the stomach. You may also be prescribed another medicine to protect the stomach lining.

Individual treatment plans vary, your healthcare team will discuss your specific plan.

Possible side effects

Dexamethasone has a number of possible side effects which can vary from patient to patient. You will experience some side effects, but it is unlikely you will experience all of them. Most side effects will ease once treatment has finished. Always report any side effects to your healthcare team as soon as possible so they can be treated quickly.

The side effects listed here are those experienced most often. For a complete list of side effects please refer to the patient information leaflet which is included in the pack with the treatment. If you do not have this, ask your healthcare team for it.

Myeloma UK provides a wide range of information booklets about side effects and their management. Relevant booklets are signposted beneath each side effect on the following pages.

You can find these along with all of our information booklets online at **myeloma.org.uk/library**.

You can also find out more about the management of these side effects by asking your healthcare team or by contacting Myeloma UK.

0800 980 3332 **AskTheNurse@myeloma.org.uk**

myeloma.org.uk

Mood changes

Dexamethasone can cause significant mood changes or worsen existing mental health conditions. You may feel anxious, tearful, irritable, or have mood swings. This can be more noticeable when taking higher doses. Telling family and friends about these side effects can help them to understand why your behaviour may change while you are taking dexamethasone. Speak with your healthcare team if you are struggling with your mental health, especially if you are feeling depressed or having suicidal thoughts.

For more information see the Living well with AL amyloidosis section of the **AL amyloidosis: Your Essential Guide** from Myeloma UK.

Skin changes

Dexamethasone may cause you to develop stretch marks, acne, or your skin may become thinner. You may also find that wounds take longer to heal. Your healthcare team may be able to prescribe creams to help your skin.

Insomnia

Insomnia or problems sleeping at night is a common side effect of dexamethasone. This can be minimised by taking dexamethasone in the morning. However, the best time to take it may vary from person to person. You may need to try different times to find out what works best for you.

Muscle weakness

You may experience muscle weakness, particularly towards the end of your dexamethasone treatment. Muscle cramps can also happen for a short time after stopping dexamethasone. Some patients find that keeping well hydrated and stretching helps to control the cramps. You may also be prescribed treatment to help with muscle cramps.

Fluid retention

Dexamethasone can cause swelling of the hands, feet, or ankles. This is called peripheral oedema. Fluid may also collect around the stomach area making you feel bloated, or in the chest, causing you to feel short of breath. If you are struggling with fluid retention, your healthcare team may prescribe some water tablets (diuretics) to help your body remove the extra fluid.

For more information see the Coping with symptoms and side effects section of the **AL amyloidosis: Your Essential Guide** from Myeloma UK.

Increased appetite

Dexamethasone can cause you to have an increased appetite and some patients may gain weight as a result of this. If weight gain is a concern, you can ask to be referred to a dietician.

Increased blood sugar

Dexamethasone may increase your blood sugar levels. If you have diabetes, you may need to check your blood sugars more frequently. You may also need to change your insulin or other medicines. Blood sugar levels should return to normal once dexamethasone treatment has stopped. Speak to your healthcare team if you are more thirsty than usual or peeing more than usual.

Stomach pain or indigestion

Dexamethasone can damage or irritate the lining of the stomach and can sometimes cause stomach ulcers. It is likely that you will be prescribed an antacid such as lansoprazole or omeprazole, to prevent these stomach problems.

> If you have any stomach pain or vomit blood you must contact your healthcare team or out of hours service immediately.

Risk of infection

Dexamethasone may affect your immune system, increasing your risk of infection. Common signs include: high or low temperature (37.5°C or above, or below 36°C), feeling shivery or cold, peeing (passing urine) more often or pain when peeing, and cough or cold symptoms.

> Infections can become serious if not treated quickly. Contact your healthcare or out of hours service immediately if you think you have an infection.

> For more information on infection see the Coping with symptoms and side effects of the **AL amyloidosis: Your Essential Guide** from Myeloma UK.

Important information about dexamethasone

Do not suddenly stop taking dexamethasone without speaking to your healthcare team first. They may need to gradually reduce the dose to prevent any severe withdrawal symptoms.

Dexamethasone can affect your judgement, memory, and decision-making skills. Consider if it is safe for you to drive.

Dexamethasone can cause a condition called osteoporosis, which causes your bones to become thinner and weaker. Your age, current bone health, and dose of dexamethasone all impact on how likely you are to develop osteoporosis. If your healthcare team feel you are at higher risk of developing osteoporosis, they may prescribe additional treatments to lower your risk.

Supplements or herbal medicines that have not been prescribed by your haematologist may cause harm when taken alongside your prescribed treatment.

You must speak to your healthcare team before taking any kind of supplement or alternative treatment, including herbal, traditional or natural medicines and remedies, and vitamins or wellbeing supplements, to ensure it is safe to do so.

If you have any questions about your treatment, speak to your healthcare team. They are the best people to ask if you have questions about your individual situation. The information in this publication is not meant to replace their advice.

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MyelomaUK

We're here for everything a diagnosis of AL amyloidosis brings

Get in touch to find out more about how we can support you

Call the Myeloma UK Infoline on
0800 980 3332

Email Ask the Nurse at
AskTheNurse@myeloma.org.uk

Visit our website at
myeloma.org.uk/al-amy

Trusted Information Creator
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We appreciate your feedback

Please fill in a short online survey about our patient information at **myeloma.org.uk/pifeedback** or email any comments to **patientinfo@myeloma.org.uk**

For a list of references used to develop our resources, visit **myeloma.org.uk/references**